

RESTAURANT/HOTEL/MOTEL OPERATION PLAN

Arizona Dept. of Liquor Licenses and Control 800 W. Washington St. 5th Floor Phoenix, AZ 85007 (602) 542-5141

Type or Print with <u>Black</u> Ink

1. Name of restaurant (Plea	se print):				
2. Must indicate the equipm	nent below by Make, Model, c	and Capacity:			
LIST ONLY THE FOLLOWING - NO ATTACHMENTS					
Grill					
Oven					
Freezer					
Refrigerator					
Sink					
Dish Washing Facilities					
Food Preparation Counter (Dimensions)					
Other					
3. Attach a copy of your Fl	JLL menu with pricing INCLUD	ING NON-ALCOHO	LIC BEVERAGES		
4. What percentage of you	or public premises is used prim	narily for restaurant o	dining?		
(Do not include kitchen, b	ar, hi-top tables, or game are	a .)%			
5. Does your restaurant hav	ve a bar area that is distinct o	and separate from t	he dining area? 🗖 Y	'ES 🗖 No	
(<u>If yes, what percentage o</u>	of the public floor space does	this area cover?)	%		
6. List the seating capacity	for:				
a) Restaurant dining area of your premises:]	1		
(DO NOT INCLUDE b) Bar area	PATIO SEATING)	[+	1		
		= 1 IATOT	1		

7. What type of dinnerware is primarily used in your restaurant?	□ Reusable	□ Disposable	☐ Both
8. Does your restaurant contain any games , televisions , or any o	other entertainment?	☐ YES	□ No
If yes, specify what types and how many (examples: 4-TV's, 2-Pa	ool Tables, 1-Video Ga	ame, etc.)	
9. Do you have live entertainment or dancing? YES No	1 2 anth Livo	- 11 - month	1 = 1
If yes, what type and how often (example: DJ-2 x a week, Karao	ke-2 x a monin, Live b	sand-1 x a moriiri,	etc.j
10. List number of employees for each position:			
Position	How many	1	
Cooks			
Bartenders			
Hostesses			
Managers			
Servers			
Other (
Other (_	
Other (
I, (Print Full Name) hereby swe with A.R.S. § 4-210(A)(2) and (3) that I have read and understand t	ear under penalty of p	perjury and in con	npliance
statements that I have made herein are true and correct to the be	est of my knowledge.	ly mui me mio	IIOn una
Applican	nt Signature:		